

**Congress of the United States**  
**Washington, DC 20515**

November 29, 2023

The Honorable Mandy K. Cohen, M.D., M.P.H.  
Director  
Centers for Disease Control and Prevention  
395 E Street SW  
Washington, DC 20024

Dear Director Cohen,

We write to you today out of concern for the health and well-being of many of our youngest and most vulnerable constituents. Over the last few months, we have consistently heard from constituents, ranging from parents to county health officials to pediatricians, regarding the ongoing barriers to accessing pediatric vaccines. Specifically, we have heard concerns about access to the updated COVID-19 vaccine for children under age three, the new respiratory syncytial virus (RSV) immunization for infants and toddlers, and the maternal RSV immunization for use during pregnancy.

We are currently in the midst of another season where various respiratory viruses are circulating and continuing to pose threats to our childrens' health and well-being. Since the onset of the COVID-19 pandemic, there have been over 15 million cases among children in the U.S. These cases also tend to surge during the winter months. Additionally, RSV poses severe threats to pediatric health in particular, as it is the leading cause of hospitalizations of infants less than a year old, and as many as 300 children under age five die due to RSV infection each year. With the invention and promotion of life-saving vaccines, such as the COVID-19 vaccine and RSV immunization, children and their families have the ability to safeguard their health against such potentially dangerous infections. However, they can only protect their health if these vaccines are readily available.

We are incredibly concerned by reports of inaccessibility of the updated COVID vaccine this fall. We have personally heard stories from parents and pediatricians about their struggles to access such vaccines in our respective states, as well as nationwide. For instance, Heather from Delmar, New York, contacted Congressman Tonko and shared that she had been trying to find a vaccine for her two-year-old child, but there were no available options. Their pediatrician did not have the vaccine, and her local pharmacies would only vaccinate children over three years old. Additionally, the closest location that would offer the vaccine to children under three was nearly two hours away in Hartford, Connecticut. She shared, "I would appreciate anything you can do, locally and/or nationally, to expedite the availability of COVID vaccines for our youngest residents. They deserve the same protection available to the rest of us, and we have a duty to ensure that they receive it." We could not agree more.

Unfortunately, this is not an isolated experience. A mother from Glenville, New York had a similar experience and struggled to find a nearby COVID vaccine for her baby with the closest availability being over an hour away in Vermont. Another mother from Albany, New York was

told by their pediatrician that they would have to wait until after the new year for COVID vaccines to be available for her toddler. However, these barriers to access are not limited to only the COVID vaccine.

We are also hearing concerning reports about the inability to access RSV immunizations for babies, toddlers, and pregnant individuals. We are aware that there is a shortage of the immunizations specifically affecting infants, toddlers, and pregnant individuals. A mother from Albany, New York shared that her toddler has asthma and is considered at a more severe risk for infection complications, yet the immunization is not available locally for her son. These are just a few of the anecdotes that have been relayed to us from our constituents, and it is concerning to estimate just how many more Americans are experiencing these barriers. Whether the barriers come from confusion, misinformation, cost and/or insurance coverage, shortages, or other limitations, we need to properly identify these barriers and ensure that we apply the lessons learned and knock out every barrier.

We are heartened that the Administration is taking steps to inform the public and roll out these vaccines in a timely manner while addressing supply issues. However, we urge more scrutiny over what can be done to make these life-saving vaccines more accessible for our nation's youngest.

With that goal in mind, please provide answers to the questions below:

- 1) Has the Centers for Disease Control and Prevention (CDC) assessed pediatric vaccine availability by different geographic regions in the country? If so, what are the differences by region? Which regions are still experiencing the largest gaps in vaccine access?
- 2) What steps is CDC implementing to improve vaccine access for our youngest children? Is CDC coordinating with other agencies to this end?
- 3) What steps is CDC implementing to improve vaccine access for pregnant individuals? Is CDC coordinating with other agencies to this end?
- 4) What is CDC doing to collaborate with pediatricians, pharmacists, and local health departments to assist them in delivering these newer vaccines to the community? Is CDC taking any specific steps on this for those under three years old?
- 5) Has CDC identified barriers to pediatric vaccine access that the agency can directly address? If so, what are these barriers? Which of these actions can be assisted through legislation, funding, or other actions from Congress?
- 6) Has CDC identified barriers to RSV immunization access for pregnant individuals that the agency can directly address? If so, what are these barriers? Which of these actions can be assisted through legislation, funding, or other actions from Congress?
- 7) For both populations, has CDC identified barriers that the agency cannot directly address? If so, what are these barriers? Which of these can be assisted through legislation, funding, or other actions from Congress?
- 8) We are hearing reports that there is confusion on whether pregnant individuals require a prescription to receive the RSV immunization at pharmacies and that this has led to delay or denial of access to the RSV immunization. Is CDC aware of this concern, and if so, how has the agency coordinated with providers and pharmacies to address this confusion?

- 9) Given the recurring pediatric vaccine shortages, what actions is CDC taking to ensure improved pediatric vaccine accessibility in future years?
- 10) Is CDC aware of any local health agencies that have struggled with funding since the end of the public health emergency? How could additional funding for these local agencies assist pediatric vaccine availability?
- 11) What is the agency doing to provide information to pregnant individuals about the RSV vaccine options? Has there been any confusion about safety?
- 12) Are there any other opportunities for federal coordination on pediatric vaccine accessibility?

Our nation's children are at risk, and we owe it to them to ensure that we do everything in our power to protect them and their families. We appreciate your attention to this matter. Thank you in advance, and we look forward to a response.

Sincerely,



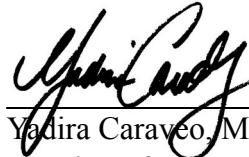
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Paul Tonko  
Member of Congress



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Kim Schrier, M.D.  
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Yadira Caraveo, M.D.  
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